

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**

**Department of Health**

Health Regulation  
& Licensing Administration



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**CERTIFICATION**

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**TO THE APPLICANT:** PLEASE READ CAREFULLY AND COMPLETELY BEFORE SIGNING. A FALSE STATEMENT ON THIS CERTIFICATION REQUIRES THAT THE DEPARTMENT PROCEED IMMEDIATELY TO DENY THE LICENSE FOR WHICH YOU ARE NOW APPLYING, OR REVOKE A LICENSE WHICH YOU ALREADY HAVE, AND FINE YOU \$1,000.00. THIS CERTIFICATION IS REQUIRED BY THE 'CLEAN HANDS BEFORE RECEIVING A LICENSE OR PERMIT ACT OF 1996' (EFFECTIVE MAY 11, 1996, D.C. LAW 11-118, D.C. CODE § 47-861 et seq.)

I, \_\_\_\_\_ certify that I do not owe more than \$100.00 to the District of Columbia as a result of:

1. Fines, penalties or interest assessed pursuant to the Litter Control Administration Act of 1995, effective March 25, 1986 (D.C. Law 6100; D.C. Code § 6-2901 et seq.);
2. Fines, penalties or interest assessed pursuant to the Illegal Dumping Enforcement Act of 1994, effective May 20, 1994 (D.C. Law 10-117; D.C. Code § 6-29) 1 et seq.);
3. Fines, penalties or interest assessed pursuant to the Department of Consumer and Regulatory Affairs Civil Infractions Act of 1985, effective October 5, 1986 (D.C. Law 6-42; D.C. Code § 6-2701 et seq.); or
4. Past due taxes.

I understand that this Certification is now required as documentation to accompany my application for a license or permit, and that by completing this Certification, I am not guaranteed that my license or permit will be approved.

I understand that if I knowingly falsify this Certification, the Department will move to revoke the license or permit for which I am applying, and to fine me \$1,000.00. I further understand that the Department may conduct an investigation to ascertain the veracity of this certification.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Title

**RETURN WITH THE APPLICATION TO:**

The Department of Health, Health Regulation Administration, Intermediate Care Facilities Division ,  
825 North Capitol Street, NE, Second Floor, Washington, DC 20002 Phone (202) 442-5929.

**YOU CAN MAKE A DIFFERENCE!** Report Violations of fraud, waste, abuse, and mismanagement in DC Government to the Office of the Inspector General (OIG) by FAXING the OIG at (202) 727-9864 or calling the OIG HOTLINE at (202) 727-0.267. All calls are CONFIDENTIAL.